

Senior Golden Games

Thursday, September 19th



Bees Landing Recreation Center
1580 Ashley Gardens Blvd



Golden Games Schedule of Events

Morning Games: 8:00am check in, 8:30am start

Men's Bocce	8:30am-10:00am
Women's Cornhole	8:30am-10:00am
Women's Bocce	10:00am-11:30am
Men's Cornhole	10:00am-11:30am
Canasta	9:00am-11:00am
Mah Jongg	9:00am-11:00am
Rummikub	9:00am-11:00am
Bridge	9:00am-11:00am
2 v. 2 Basketball	8:30am-10:00am
4 v. 4 Volleyball	10:00am-11:30am
Baking Contest	<i>Items must be turned in by 10am or they will not be judged</i>
Lunch of Legends at 11:30am	
Pickleball <i>(Check in by 12:30pm)</i>	1:00pm-4:00pm

GOLDEN GAMES REGISTRATION FORM

PARTICIPANT INFORMATION

Participant Name: _____		Age: _____	Birthday: _____
Street address: _____	Phone Number: _____		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
City: _____	State: _____	ZIP Code: _____	
Email Address: _____	Emergency Contact: _____		Emergency Contact Phone Number: _____

EVENT INFORMATION

Registration fee (\$8) includes the Lunch of Legends, an event lanyard and 1 event (excludes pickleball). Lunch of Legends is at 11:30am. Morning games check in is at 8am. Pickleball check in is at 12:30pm.

Pickleball will be rally scoring, and round robin style with an opportunity to play against every team in their category. If there are not enough Beginners, the two categories will be 1.) Beginner and Intermediate and 2.) Advanced.

Will you be attending the Lunch of Legends? ☐ Yes ☐ No

For your Chick-Fil-A Boxed Meal would you like Nuggets or Chicken Sandwich? ☐ Nuggets ☐ Sandwich

Have you participated before?	Yes	No	If so, do you still have your lanyard?	Yes	No
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Sporting Events (please check all you wish to participate in):

☐ Men's Bocce
☐ Women's Bocce
☐ Men's Cornhole
☐ Women's Cornhole

☐ 2 v. 2 Basketball
☐ 4 v. 4 Volleyball

☐ Beginner Pickleball
☐ Intermediate Pickleball
☐ Advanced Pickleball

Gaming Events (please check all you wish to participate in):

☐ Bridge
☐ Canasta
☐ Rummikub
☐ Mah Jongg

Baking Contest
(1st place winner receives a Swag Bag!)

☐ Cakes
☐ Cookies/Brownies
☐ Pies

PAYMENT INFORMATION

Registration Deadline is September 5, 2019. We accept VISA, MasterCard, check, or money order. Please make checks payable to City of Charleston.

Registration Fee:	\$8	
Pickleball Fee: (Includes registration fee. \$8 additional is not necessary)	\$15	
Included Event:	FREE	
Other Event:	\$1	
Other Event:	\$1	
Other Event:	\$1	TOTAL: _____

Completed registration form, waiver, and fee must be submitted to Bees Landing Recreation Center by September 5th. For questions, contact Bees Landing Recreation Center at (843) 402-4571 or email Nina Guzzo at guzzon@charleston-sc.gov. Event Coordinators are Nina Guzzo and Sam Weatherford.

Received by:

Release of Liability for Adult Participants

Read before signing

IN CONSIDERATION OF _____, being allowed to participate in any way in City of Charleston, Department of Recreation program; travel on field trips, related events and activities, the undersigned acknowledges, appreciates, and agrees that:

The risk of injury to myself from the activities involved in these programs is significant, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, I myself, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE THE other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event (HEREIN AFTERWARDS REFERED TO AS "RELEASEES"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property incident to my child's involvement or participation in these programs which includes transporting my child to and from such programs, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

FOR MYSELF, I KNOWINGLY AND FREELY ASSUME ALL RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and,

I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my readiness for participation and/or in the program itself, I will remove myself from the participation and bring such attention of the nearest official immediately; and, I, for myself, and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY INDEMNIFY AND HOLD HARMLESS all the above Releases from any and all liabilities incident to my involvement or participant in these programs, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARY WITHOUT ANY INDUCEMENT.

X _____
PARTICIPANT SIGNATURE PRINTED NAME DATE SIGNED

UNDERSTANDING OF RISK

I understand the seriousness of the risks involved in participating in this and any recreation program, my personal responsibilities for adhering to rules and regulation, and accept them as a participant.

X _____
PARTICIPANT SIGNATURE PRINTED NAME DATE SIGNED